To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

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48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED **PAGE 1/2**

17 SEP 20 PM 1: 38 (See Reverse Side for Instructions)

1. NAME OF COMMITTEE IN FUL JUDGE ROY M		R US SEN	ATE						
ADDRESS (number and street)	PO BOX 5032								
CITY STATE MONTGOMERY AL				ZIP CODE 36103					
2. NAME OF CANDIDATE MOORE, ROY JUDGE				3. OFFICE SOUGHT (State and District) Senate AL 00			n	4. FEC IDENTIFICATION NUMBER C00639401	
5. IS THIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	×	<u> </u>		OTICE FILED O			,2017
CALDWELL, EARL, , ,				Name of Employer RETIRED				Date (month, day, year)	Amount
MAILING ADDRESS 172 N PLAZA CT			Transaction ID : F6.30382				09/10/2017	1000.00	
CITY STATE ZIP CODE			Occupation						
MT PLEASANT	sc	29464-6	301	RETIRED					
B. FULL NAME DUNN, DENNIS, , ,				Name of Employer SELF-EMPLOYED				Date (month, day, year)	Amount
MAILING ADDRESS P. O. BOX 2710								09/07/2017	1000.00
сту	STATE	ZIP CODE		Transaction ID : F6.30380 Occupation					
SUN VALLEY	ID	83353		AUTHOR					
C. FULL NAME HINMAN, ROY, , ,			Name of Employer SELF-EMPLOYED				Date (month, day, year)	Amount	
MAILING ADDRESS 100 ARRICOLA AVE.				Transaction ID : F6.30298				09/13/2017	1700.00
CITY	STATE	ZIP CODE		Occupation					
SAINT AUGUSTINE	FL	32080		PHYSICIAN					
D. FULL NAME HOTZE, JANIE, S, ,				Name of Employer RETIRED				Date (month, day, year)	Amount
MAILING ADDRESS 20214 BRAIDWOOD			Transaction ID : F6.30300				09/13/2017	2700.00	
SUITE 215	STATE	ZIP DODE		Occupation					
KATY	ΤX	77450		RETIRED				,	
E FULL NAME HOTZE, STEVEN, F,				Name of Employer HOTZE HEALTH & WELLNESS CENTER				Date (month, day, year)	Amount
MAILING ADDRESS 20214 BRAIDWOOD								09/13/2017	2700.00
SUITE 215			Transaction ID : F6.30299						
CITY KATY	STATE TX	77450		Occupation FOUNDER/CEO					
SIGNATURE (optional) HOBSON, RICH	1 '''	1				DATE 09/20/2017		Federal El 999 E Street, NV	information contact: lection Commission V, Washington, OC 20463 -9530, Local 202-694-1100

Any information copied from reports and statements field under the Federal Election Campaign Act may not be solid or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Rovised 03/2016)



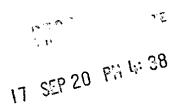
48 HOUR NOTICE OF **CONTRIBUTIONS/LOANS RECEIVED**

PAGE 2/2 120 - 12D

	•	Reverse Side for Inst	tructions)		VED .	EP 20 Ph 4: 38
To be used to report all contributions (including to	, 17 ^S	EPZO				
JUDGE ROY MOORE FOR	US SENATE					
ADDRESS (number and street) PO BOX 5032					1	
CITY, STATE, and ZIP CODE			 		-	
MONTGOMERY		AL	36103		continuation	n page
2. NAME OF CANDIDATE		3. OFFICE SOUGH	IT (State and Dist	trict)	4. FEC IDENTIFICATIO	N NUMBER
MOORE, ROY JUDGE, , ,		Senate	AL	00	C00639401	
5. IS THIS AN AMENDMENT? NO, THIS IS A	NEW FILING	YES, IT AMENDS	THE NOTICE FO	LED ON	09 , 20	, 2017
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employe	er .		Date (month, day, year)	Amount
NAEGELE, ELLIS, F,		HOMEMAKER				
2355 RUE DU JARDIN PH 9					09/07/2017	1000.00
		Transaction ID	: F6.30377		4	
NAPLES .	FL 34105-3268	Occupation HOMEMAKER				
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employe			Date (month,	Amount
NAEGELE, ROBERT, O., J	R.	RETIRED			day, year)	
2355 RUE DU JARDIN PH 9					09/07/2017	1000.00
2333 NOE DO 3ANDIN FIT 9		Transaction ID	: F6.30379			
NAPLES	FL 34105-3268	Occupation				
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	75 04100-0200	RETIRED Name of Employe			Date (month,	Amount
RINDLAUB, SARAH,		HOMEMAKER	zi		day, year)	,
THINDLAUD, SATIALI,		T TOWNER TO THE TOWNER TOWNER TO THE TOWNER TO THE TOWNER TO THE TOWNER TO THE TOWNER TOWNER TO THE TOWNER TOWNER TO THE TOWNER TOWNER TO THE TOWNER TO THE TOWNER TOWNER TOWNER TO THE TOWNER TOWNER TOWNER TOWNER TO THE TOWNER			09/07/2017	1000.00
8441 SE 68TH ST # 217						
		Transaction ID Occupation	: F6.30374			
MERCER ISLAND	WA 98040-5235	HOMEMAKER	l			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employe	3f		Date (month, day, year)	Amount
					1 100, 100,	
		Occupation				
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employe	3f		Date (month,	Amount
					day, year)	
		Occupation				
		1				

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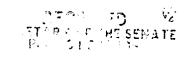


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09/20/2017 11:48 AM



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17 SEP 20 PH 4: 37

From

To

Number of pages

3

Message

This is the Amended 48 Hour Report that was closed on 9.14.17

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HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 . PHONE(202) 224-0322

4/04/16

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